

Work Order ID 94057

November-30-12 8:29:33 AM

94057

Page 1

Item ID: D3915-041 Accept

Revision ID:

Item Name: Light Lid Assembly, Long Basket

Start Date: 11/28/12 Start Qty: 1.00 *1*

Required Date: 12/14/12 Req'd Qty: 1.00 *1*

Reference:

N900040100

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Customer:

Approvals: Process Plan: MLS Date: 12-12-03 Tooling:

Date:

QC: Date: SPC (Y/N):

Date:

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
----------	--------------

D3915	C
-------	---

100 Weld per dwg A/R Aluminum rod Batch: 125127 0.00

100

Large Fab

Large Fab

Memo

0.00

1- assemble ribs, weld as per dwg D3915 using DT9606A. When welding D4019-3, weld top and bottom then make a small hole in the weld to let air out. Then weld remaining sides of D4019-3 Rib. Let it cool down, then block holes with weld.

****DO NOT WELD THE (4) CORNERS. GRIND OFF CORNERS TO HAVE A 1/8" GAP TO GET THE ACID AND ALODINE OUT OF BASKET LID FRAME****

2- weld hinge, label plate and Mounting plates as per dwg D3915

110

QC9- Inspect visual per QSI004- Fusion Welds 0.00

110

QC

Quality Control

Memo

0.00

Handwritten: 13.7.25 (circled 1x)

Handwritten: 1x (DAS 09 2-89) 13.07.26

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 94057

November-30-12 8:29:33 AM

94057

Page 2

Item ID: D3915-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Light Lid Assembly, Long Basket

Start Date: 11/28/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Run Start ***NR1***

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Stop ***NR2***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC5- Inspect part completeness to step on W/O	0.00							
120									
QC	Memo	0.00							
Quality Control									
130	Chemical Conversion Coat per QSI005 4.1	0.00							
130									
HandFinish	Memo	0.00							
Hand Finishing	***ENSURE TO RINSE CAREFULLY ACID AND ALODINE***								
140	Weld per dwg A/R Aluminum rod Batch: <u>M123928</u>	0.00							
140									
Large Fab	Memo	0.00							
Large Fab	1- weld (4) corners								

DAS
09
13-07-26

1 2613-7-29

1 13-8-1

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 94057

November-30-12 8:29:33 AM

94057

Page 3

Item ID: D3915-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Light Lid Assembly, Long Basket

Start Date: 11/28/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Run Start ***NR1***

Approvals: Process Plan: Date: Tooling: Date:

Stop ***NR2***

QC: Date: SPC (Y/N): Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	QC9- Inspect visual per QSI004- Fusion Welds	0.00							
150									
QC	Memo	0.00							
Quality Control									
155	QC6- Inspect dimensions to drawing	0.00							
155									
QC	Memo	0.00							
Quality Control									
	inspect fit of lid with base								
157	Chemical Conversion Coat per QSI005 4.1	0.00							
157									
HandFinish	Memo	0.00							
Hand Finishing	1- realodine corners ***do not acid etch***								

1 13-08-02 13-08-02 13-08-02

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 94057

November-30-12 8:29:33 AM

94057

Page 4

Item ID: D3915-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Light Lid Assembly, Long Basket

Start Date: 11/28/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start ***NR1***

QC: Date: SPC (Y/N): Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

160

White Gloss(Ref:4.3.5.1) per QSI005 4.3-Alum

0.00

160

Powdercoat

Powder Coating

Memo

0.00

1- touch up corner with alodine only
2- Plug holes prior to

1ST COAT:

START TIME: 7:45

OVEN TEMPERATURE: 320°F

FINISH TIME: 8:45

***** 2nd coat if necessary*****

2ND COAT:

START TIME:

OVEN TEMPERATURE:

FINISH TIME:

1X m/f 13/08/07

170

QC3- Inspect Part Finish

0.00

170

QC

Quality Control

Memo

0.00

1x d M 13/08/07

W126125

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 94057

November-30-12 8:29:33 AM

94057

Page 5

Item ID: D3915-041

Accept

N900040100

Setup/Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Light Lid Assembly, Long Basket

Start Date: 11/28/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 1.00

1

Customer:

Reference:

Run Start ***NR1***

Approvals: Process Plan: Date: Tooling: Date:

Stop ***NR2***

QC: Date: SPC (Y/N): Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

180

Assemble as per dwg

0.00

180

HandFinish

Memo

0.00

Hand Finishing

1- Install webbing as per dwg

2- Install placard and label as per dwg

190

QC5- Inspect part completeness to step on W/O

0.00

190

QC

Memo

0.00

Quality Control

200

Identify as per dwg & Stock Location: W10

0.00

200

Packaging

Memo

0.00

Packaging

D 4030-043 / B94092

1 x f 12/08/07

DA
05 13-08-08

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 94057

November-30-12 8:29:33 AM

94057

Page 6

Item ID: D3915-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Light Lid Assembly, Long Basket

Start Date: 11/28/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Run Start ***NR1***

Approvals: Process Plan: Date: Tooling: Date:

Stop ***NR2***

QC: Date: SPC (Y/N): Date:

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID Tool # Plan Accept Reject Reject Insp.
Code Qty Qty Number Stamp

210

QC21- Final Inspection - Work Order Release

0.00

210

QC

Memo

0.00

Quality Control

11-30-12 13-08-12

13-8-8

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																

Picklist Print

November-30-12 8:29:32 AM

Page 1

Work Order ID: 94057

Parent Item: D3915-041

Parent Item Name: Light Lid Assembly, Long Basket

Start Date: 11/28/12

Required Date: 12/14/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A new issue DD 10.03.19 verified by:EC
 10.04.20 verified by:EC IPP Rev:C add realodine DD 10.04.26 verified by:EC IPP
 Rev:D as per dwg revC DD 10.08.18 verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2957 Mounting Plate		Manufactured	No			100	Each	8.0000	4	4		12/3/25	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				WA004		8							
				84820		2							
				87753		6							
D3915-1 Rib		Manufactured	No			100	Each	5.0000	2	2		12/3/25	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				WA005		5							
				87059		4							
				88152		1							
D4016-5 Hinge Half, Light Lid		Manufactured	No			100	Each	17.0000	3			12/3/25	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				WA004		17							
				87470		14							
				88076		3							
D4019-3 Rib		Manufactured	No			100	Each	7.0000	3	3		12/3/25	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				WA005		7							
				88340		7							
D4029-041 Webbing (Long Basket)		Manufactured	No			180	Each	3.0000	1	1		12/3/25	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST489		3							
				88283		3							

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

November-30-12 8:29:32 AM

Work Order ID: 94057

Parent Item: D3915-041

Parent Item Name: Light Lid Assembly, Long Basket

D4035-045 Manufactured No
Lid Rib Assembly, Fwd (Light)

Location

WA005 89089

D4035-047 Manufactured No
Lid Rib Assembly, Aft (Light)

Location

WA005 89236

D4056-1 Manufactured No
Label Plate

Location

WA004 85016 87247

MS20600-AD4W3
Cherry Rivets

4 per ASI
9657-011

Purchased No

Location

ST311 111636 117601 118626 120308 122151 123525
WA003 107939 122452

100 Each 5.0000

Loc Qty

5 5

100 Each 4.0000

Loc Qty

4 4

100 Each 26.0000

Loc Qty

26 22 4

180 Each 1,399.0000

Loc Qty

1130 36 3 200 232 205 454 269 133 136

Start Date: 11/28/12

Start Qty: 1.00

Required Date: 12/14/12

Required Qty: 1.00

PCL 13.7.25
B 94491 → ①

PCL 13.7.25
B 87406 → ①

PCL 13.7.25
B 87247 → ①

M 125604
13/4/2

Shop Packet Print

Page 2

November-30-12 8:29:32 AM

November-30-12 8:29:32 AM

Shop Packet Print

Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION		AGAINST DEPARTMENT/PROCESS							
	Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
	Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coord.	<input type="checkbox"/>	Quality	<input type="checkbox"/>
	Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other	<input type="checkbox"/>
	Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		

DART SERVICE INSTRUCTION

TO AMEND INSTALLATION INSTRUCTIONS D350-607-2 REV. C AND EARLIER,
INSTALLATION INSTRUCTIONS D350-607-3 REV. A AND EARLIER, AND
INSTRUCTIONS FOR CONTINUED AIRWORTHINESS ICA-D350-607 REV. 4 AND EARLIER

REF. TCCA STC: SH94-14

REF. FAA STC: SR00213NY

REF. EASA STC: EASA.10016996

REF. ANAC STC'S: 2007S03-03/04/05/06

1.0 PURPOSE:

It has come to DART's attention that the webbing strands of the cargo net riveted to the structure of the lightweight lids on D350-607-443/-447/-543/-547 Heli-Utility-Baskets at CHG 004 and earlier may pull through the small washer and rivet head and detach during operation.

The purpose of this service instruction is to provide parts and instructions to replace the NAS1149DN416J Washers and MS20600AD4W3 Rivets fastening the webbing strands of the cargo net onto the structure of the lightweight lids with NAS1149DN949J Washers and MS20600AD4W4 Rivets.

Note: This change has been incorporated at a manufacturing level on D350-607-443/-447/-543/-547 Heli-Utility-Baskets at CHG 005 and subsequent and on D350-607-417/-419 Lightweight Lid Kits at CHG 003 and subsequent.

2.0 PROCEDURE:

2.1 Carefully remove existing rivets and washers attaching the webbing to the lid frame without enlarging holes in the webbing or the lid frame.

2.2 Inspect the basket lid structure in accordance with ICA-D350-607. It is acceptable to inject Sikaflex -241/-291 or Proseal 890 or MIL-S-8802 Class B2 sealant into the lid structure to trap rivet debris inside the tubular structure. Repair and touch up finish as required.

2.3 Inspect the D4029-041 Webbing (long basket) or D4029-043 Webbing (short basket) for wear. The maximum acceptable hole size is Ø0.188" (4.8 mm). Replace the webbing if holes are larger than Ø0.188" (4.8 mm) or if the webbing is worn or cuts have been found.

2.4 Re-install the webbing as shown in Figure 1 of this service instruction

Note: It is acceptable to upsize rivets to MS20600AD5W4 (customer supplied) and enlarge the holes in the basket lid structure to Ø0.156" (3.96 mm) if holes were enlarged at Step 2.1.






3.0 PARTS LIST

QTY -011	QTY -013	PART NUMBER	DESCRIPTION
X		DSI 9657-011	WASHER CHANGE (LONG LID)
	X	DSI 9657-013	WASHER CHANGE (SHORT LID)
34	30	MS20600AD4W4	BLIND RIVET
34	30	NAS1149DN949J	WASHER

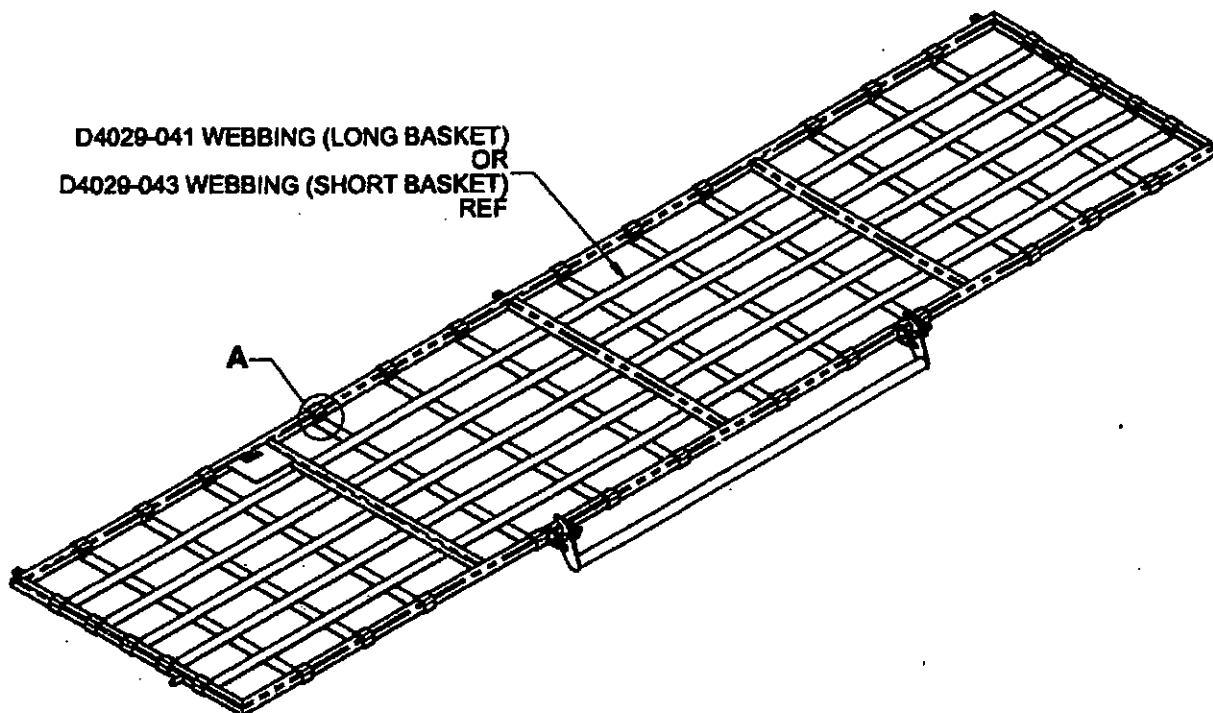
CANADA
DEPARTMENT OF TRANSPORT
AIRCRAFT CERTIFICATION
BRANCH
DAO #01-O-01

APPROVED
BY: 
D. SHEPHERD (DE #02)

DATE: 13.06.06
CERT. NO.: SH94-14
ISSUE NO.: 5

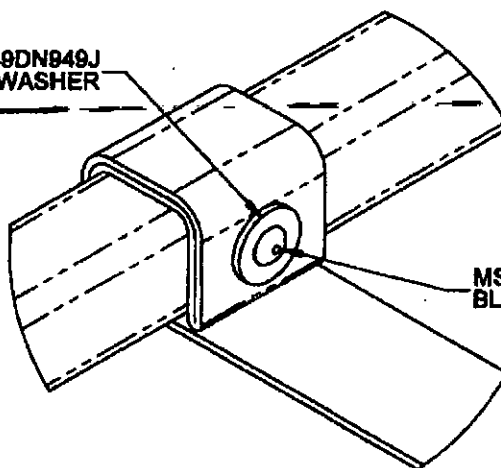
A	NEW ISSUE	MB	13.06.06
REV.	DESCRIPTION	BY	DATE
DESIGN		DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. A
MFG. APPR.	DA	DSI 9657	SHEET 1 OF 2
APPROVED		TITLE	SCALE
DE APPR.		WASHER CHANGE	NTS
DATE	13.06.06	COPYRIGHT © 2013 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

D4029-041 WEBBING (LONG BASKET)
OR
D4029-043 WEBBING (SHORT BASKET)
REF



**FIGURE 1: D3915-041 LONG BASKET LID ASSY (LIGHT WEIGHT)
D4019-041 SHORT BASKET LID ASSY (LIGHT WEIGHT)**

NAS1148DN949J
WASHER



MS20800AD4W4
BLIND RIVET

DETAIL A: RIVET/WASHER REPLACEMENT

34 PL ON D3915-041, 30 PL ON D4019-041

CANADA
DEPARTMENT OF TRANSPORT
AIRCRAFT CERTIFICATION
BRANCH
DAO # 01-O-01

APPROVED

BY: *[Signature]*
D. SHEPHERD (DE # 02)

DATE: 13.06.06
CERT. NO.: SH84-14
ISSUE NO.: 5

DESIGN	<i>[Signature]</i>	DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. A
MFG. APPR.		DSI 9657	SHEET 2 OF 2
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	WASHER CHANGE	
DATE	13.06.06	NTS	

COPYRIGHT © 2013 BY DART AEROSPACE LTD
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS
NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT
WRITTEN PERMISSION FROM DART AEROSPACE LTD.

